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CONFIRMATION NO. 4639

SERIAL NUMBER 10/659,408	FILING OR 371(c) DATE 09/10/2003 RULE	CLASS 546	GROUP ART UNIT 1616	ATTORNEY DOCKET NO. 125.06
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APPLICANTS

Rajiv Parikh, Palo Alto, CA;
 Bhairavi Parikh, Palo Alto, CA;
 Andrew Newman, Palo Alto, CA;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 12/16/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

20350

TITLE

Method for treating airway disorders

FILING FEE RECEIVED 742	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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